

24/48 HOUR NOTICE OF INDEPENDENT EXPENDITURES

(SCHEDULE E)

PAGE 1 OF 1
FOR SE OF FORM 24/48

NAME OF COMMITTEE (In Full)

SENATE CONSERVATIVES ACTION

FEC IDENTIFICATION NUMBER ▼

C C00524181

Check If ☐ 24-hour report ☒ 48-hour report ☒ New report ☐ Amends report filed on

MM / DD / YYYY

Full Name (Last, First, Middle Initial) of Payee

Red Sea LLC

Date

MM / DD / YYYY

Mailing Address 4550 Montgomery Ave.

Amount

504980.00

City
BethesdaState
MDZip Code
20814

Transaction ID : SE.4118

Purpose of Expenditure
IE-Donnelly-Media Production/PlacementCategory/
Type 004

Office Sought: ☐ House State: IN
☒ Senate District: 00
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

JOSEPH S DONNELLY

Check One: ☐ Support ☒ OpposeCalendar Year-To-Date Per Election
for Office Sought

504980.00

Disbursement For: ☐ Primary ☒ General
2012 ☐ Other (specify) ▶

Full Name (Last, First, Middle Initial) of Payee

Date

MM / DD / YYYY

Mailing Address

Amount

City

State

Zip Code

Purpose of Expenditure

Category/
Type

Office Sought: ☐ House State:
☐ Senate District:
☐ President

Name of Federal Candidate Supported or Opposed by Expenditure:

Check One: ☐ Support ☐ OpposeCalendar Year-To-Date Per Election
for Office Sought

Disbursement For: ☐ Primary ☐ General
☐ Other (specify) ▶

(a) SUBTOTAL of Itemized Independent Expenditures.....▶

504980.00

(b) SUBTOTAL of Unitemized Independent Expenditures▶

(c) TOTAL Independent Expenditures.....▶

504980.00

Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.

Lisa Lisker

[Electronically Filed]

Date

MM / DD / YYYY

Signature